JIS CODE: PAA Approved, SCAO

STATE OF MICHIGAN PROBATE COURT

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| COUNTY | PETITION TO AL | LOW ACCOUNT(S) | |
|--|----------------------------------|-------------------------------|--|
| CIRCUIT COURT - FAMILY DIVISION | | | |
| In the matter of | | | |
| One or more accounts listing all inco- knowledge during the accounting portion. | | | sbursements which have come to my |
| The interested persons, addresses, except as follows: (for each person v | | | earing on the initial application/petition, ach separate sheet if necessary) |
| | | | |
| 3. The attached accounts include:a. attorney fees and costs in theb. fiduciary fees and expenses in | amount of \$ the amount of \$ | | |
| IREQUEST: | | | |
| 4. The court approve my fees and expension statements attached to the account5. That the account(s) be allowed as r | i. | and costs in the amount(s) | stated above as set forth in the itemized |
| interim account. | , | | |
| specify whether 1st, 2nd, 3rd accounts, | annual, final account | account(s). | |
| 6. ☐ I am the conservator and I reque estate be ☐ continued. ☐ closed. | st allowance of my final | account, that I be discharg | ed, bond (if any) be cancelled, and the |
| I declare under the penalties of perjury information, knowledge, and belief. | that this petition has be | en examined by me and tha | at its contents are true to the best of my |
| | | Date | |
| Attorney signature | | Fiduciary signature | |
| Attorney name (type or print) | Bar no. | Fiduciary name (type or print |) |
| Address | | Address | |
| City, state, zip | Telephone no. | City, state, zip | Telephone no. |

Do not write below this line - For court use only